



# CONTRACTOR REGISTRATION FORM

**REGISTRATION NOT REQUIRED IF PREVIOUSLY REGISTERED**  
**(MUST VERIFY STILL CURRENT)**

**PROJECT NAME / PROJECT ADDRESS:**

\_\_\_\_\_

**Contractor Type (circle one)**

General Contractor	Electrical	Plumbing	Mechanical	Fire Alarm	Sign
	Irrigator	Backflow	Fire Sprinkler	Fire Sprinkler	Septic

License Number: \_\_\_\_\_

License Type: \_\_\_\_\_ (JOURNEYMAN, MASTER, ETC)

Licensee's Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Street Address: \_\_\_\_\_

Company City, State, Zip: \_\_\_\_\_

Company Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Licensee's Signature: \_\_\_\_\_

**YOU MUST ALSO SUBMIT THE FOLLOWING:**

- (1) CONTRACTOR'S LICENSE
- (2) CERTIFICATE OF LIABILITY INSURANCE
- (3) DRIVER'S LICENSE

Rev: 3/30/2020